

2008 Mail Service Incentive for Maintenance Medication

Maintenance Medication	Retail Pharmacy Up to 30-day supply* (one year + 12 fills)	Mail Service Up to 90-day supply (one year – 4 fills)	Annual Member Cost Savings at Mail Service
Generic	\$5 x 2 Fills = \$ 10 \$10 x 10 Fills = \$100 Total Copayments = \$110	\$10 x 4 Fills = \$40	Total Savings = \$70
Preferred Brand	\$15 x 2 Fills = \$ 30 \$25 x 10 Fills = \$250 Total Copayments = \$280	\$25 x 4 Fills = \$100	Total Savings = \$180
Non-Preferred Brand	\$45 x 2 Fills = \$ 90 \$75 x 10 Fills = \$750 Total Copayments = \$840	\$75 x 4 Fills = \$300	Total Savings = \$540
Non-Preferred Brand with a Copay Waiver	\$30 x 2 Fills = \$ 60 \$45 x 10 Fills = \$450 Total Copayments = \$510	\$45 x 4 Fills = \$180	Total Savings = \$330

^{*} Note: After the second fill of maintenance medication at your retail pharmacy, your copayment will increase to the mail service copayment level.